

# **GENERAL ETIQUETTE**

## **for**

### **Interacting with People with Disabilities**

If you are interacting with people with disabilities for the first time: BE YOURSELF! As in any new situation, everyone will feel more comfortable if you relax.

#### **The Basics**

- Ask before you help. Just because someone has a disability, don't assume they need help. If the setting is accessible people with disabilities can usually get around fine.
- Be sensitive about physical contact. Some people with disabilities depend on their arms for balance. Grabbing them, could knock them off balance. Avoid patting a person on the head or touching his wheelchair, scooter or cane. People with disabilities consider their equipment part of their space.
- Talk with the person with a disability, not their spouse, assistant, interpreter, or others nearby.
- Maintain the eye contact and body language you would normally use during any other conversation.
- Treat adults as adults. Address people with disabilities by their first names only when extending that same familiarity to all others.
- Relax. Don't be embarrassed if you happen to use common expressions such as "See you later" or "Did you hear about this?" that seems to relate to a person's disability.
- Don't make assumptions. If you have a question about what to do, what language or terminology to use, or what assistance, if any, they might need, the person with the disability should be your first and best resource. Do not be afraid to ask their advice.
- Respond graciously to requests. When people who have a disability ask for an accommodation, it is not a complaint. It shows they feel comfortable enough to ask for what they need. If they get a positive response they will tell others about the good service they received.
- The most important thing to focus on during a conversation with a person who has a disability is the overall goal, which is simply communication between two individuals. Ultimately, it is what is communicated that will be important, not how it is communicated.

## LANGUAGE TIPS

There are some general hints which can help make your communication and interactions with people with all types of disabilities more successful:

- The preferred terminology is "disability" or disabled, not "handicap" or "handicapped."
- Never use terms such as "retarded", "dumb", "psycho", "moron", or "crippled"; they are very demeaning and disrespectful to people with disabilities.
- Remember to put people first. It is proper to say "person with a disability", rather than "disabled person."
- If you are unfamiliar with someone, or their disability, it is better to wait until they describe their situation to you than to make your own assumptions about them.
- Many types of disabilities have similar characteristics, and your assumptions may be wrong.
- An important thing to remember in any conversation with someone who has a disability is: "assume nothing."
- Use your normal speaking speed.
- It is always a good idea to speak clearly, without mumbling or slurring words
- Don't be overly friendly, paternalistic, or condescending when speaking to a person with a disability.
- Most people, even if they are unable to speak to you in a "normal" manner, have normal or above-average intelligence.
- Your use of abnormal speech or simplistic language will lessen the chances of having a successful conversation.
- Be patient not only with the person with the disability, but with yourself.
- Frustration may come from both sides of the conversation, and needs to be understood and dealt with by both parties.
- Once again, the most important thing to focus on during a conversation with a person who has a disability is the overall goal. It is simply communication between two individuals.
- Since about 20% of people in our society have some type of disability, you never really know when that will be a factor in one of your conversations.

## **SPECIFIC DISABILITIES**

The following summary of the characteristics of different types of disabilities contains many true statements, but no absolute truths:. Remember that every person with a disability is an individual. While this summary is about disabilities, it is important to remember that you are not interacting with disabilities; you are interacting with individuals with disabilities. Remember also that they are people first. It is most important to ask the individual what terminology they prefer, or if they need assistance. With this in mind, the following general guidelines are offered.

### **PEOPLE WHO ARE BLIND**

#### **Things to Know**

- Most persons who are blind have some sight, rather than no sight at all.
- Many people who are blind are mobile and independent. Some people who are blind view blindness not as a disability as much as an inconvenience.
- While many people who are blind can use Braille, the majority of persons who are blind do not.
- A person may have a visual disability that is not obvious. Be prepared to offer assistance – for example- in reading when asked.

#### **Things to Do**

- Introduce yourself. Identify who you are and what your job or role is. Be sure to introduce him to others who are in the group, or enters the room so that he's not excluded.
- If you have met before, remind them of the context; they won't have the visual cues to jog their memory.
- Be descriptive when giving directions. Saying "over there" has little meaning to someone who cannot see you point. "Four doors after turning right from the elevator" would be much more helpful.
- Always ask someone if they need your assistance and how you can assist them.
- Lead someone who is blind only after they have accepted your offer to do so. Allow them to hold your arm, rather than you holding them. It is important to let people with vision impairments control their own movements.
- Many techniques are used as tools for independence, but individuals with disabilities use only things that work for them.
- If the person has a guide dog, walk on the side opposite the dog. As you are walking, describe the setting, noting any obstacles, such as stairs ('up' or 'down') or a big crack in the sidewalk. Other hazards include: revolving doors, half-

opened filing cabinets or doors, and objects protruding from the wall at head level such as hanging plants or lamps. If you are going to give a warning, be specific. Shouting, "Look out!" does not tell the person if he should stop, run, duck or jump.

- Remember to describe sights or objects from their perspective, not yours. Tell them when you have brought new items into their environment, describing what they are and, most importantly, where you have put them.
- Offer to read written information—such as the menu, merchandise labels or bank statements—to customers who are blind. Count out change so that they know which bills are which.
- If you need to leave a person who is blind, inform him first and let him know where the exit is, then leave him near a wall, table, or some other landmark. The middle of a room will seem like the middle of nowhere to him.

### **Things to Avoid**

- Do not move items (furniture, personal items) after their position has been learned by the person. This can be frustrating and, in some cases, dangerous for the person with a disability.
- Do not use references that are visually oriented like, "over there near the green plant."
- Don't touch the person's cane or guide dog. The dog is working and needs to concentrate. The cane is part of the individual's personal space. If the person puts the cane down, don't move it. Let him know if it's in the way.

### **Things to Consider**

- Persons who are blind have more often been told what to do rather than asked what they would prefer doing. This attitude is not acceptable towards any person.

## **PEOPLE WITH LOW VISION**

### **Things to know**

- Persons with low vision may not be wearing dark glasses or using a cane and therefore are not easily identifiable.
- A person with low vision may need written material in large print.
- It is easiest for most people with low vision to read bold white letters on a black background.

### **Things to do**

- Ask the person what size and type font they prefer to read.

- Remember that you can use a copy machine to enlarge print.
- Good lighting is very important.
- Have a simple (drug store brand) magnifying glass available.
- Use a thick point black marker when writing down information. Check with the person to determine what size to write letters/numbers so they can see it.
- Keep walkways clear of obstructions.

### **Things to Avoid**

- Very shiny paper or walls can produce a glare that disturbs people's eyes.
- Avoid using all uppercase letters because it is more difficult for people with low vision to distinguish the end of a sentence.
- Do not move items (furniture, personal items) after their position has been learned by the person. This can be frustrating and, in some cases, dangerous for the person with a disability.

## **DEAF AND/OR HEARING IMPAIRED**

### **Things to Know**

- Most persons who are deaf or hearing impaired have some hearing, rather than no hearing at all.
- Sign language is not another form of English; it is an official language with its own grammar, syntax and rules.
- Not all persons who are deaf use sign language.
- Lip-reading, while helpful without sound clues, is only 30% - 50% effective, and sometimes less. Not all persons who are deaf lip-read.
- Long conversations with persons who can lip-read can be very fatiguing to the person who has the disability.
- English is a second language for many deaf people. Reading and writing English may be challenging for some deaf people.
- Not all persons who are deaf speak.
- Some deaf and hard of hearing persons have Service Animals that alert them to certain sounds.
- People who are hard of hearing, however, communicate in English. They use some hearing but may rely on amplification and/or seeing the speaker's lips to communicate effectively.
- The majority of late deafened adults do not communicate with sign language, do use English and may be candidates for writing and assistive listening devices to help improve communication.

- People with cochlear implants, like other people with hearing loss, will usually inform you what works best for them.

### **Things to Do**

- Find out how the person communicates best.
- If the person uses an interpreter, address the person, not the interpreter.
- If the person reads lips, speak in a normal, not exaggerated, way.
- Short simple sentences are best. If the person lip-reads, avoid blocking their view of your face. Make sure the lighting is good.
- Gain the person's attention before starting a conversation. Depending on the situation, you can extend your arm and wave your hand, tap her on the shoulder or flicker the lights.
- If there is some doubt in your mind whether you were understood, rephrase your statement and assure that understanding has been reached.
- Be aware of situations where a person may be waiting for a service (transportation, a table, the start of an activity) where the common way to communicate is an announcement or the calling of the person's name. Advise them when their name is called.
- When talking, face the person. A quiet, well-lit room is most conducive to effective communication. If you are in front of the light source—such as a window—with your back to it, the glare may obscure your face and make it difficult for the person who is hard of hearing to speech read.
- Speak clearly. Most people who are hard of hearing count on watching people's lips as they speak to help them understand.
- If you need to contact the Deaf or hearing impaired person, make sure you take note of the preferred method of notifying them.

### **Things to Avoid**

- There is no need to shout at a person who is deaf or hard of hearing. If the person uses a hearing aid, it will be calibrated to normal voice levels; your shout will just sound distorted.
- Do not become impatient or exasperated with the person if it takes longer to communicate.
- Make sure there are no physical barriers between you and the person you are in conversation with. If the person is using hearing aids, avoid conversations in large, open and noisy surroundings. Avoid chewing gum, smoking or obscuring your mouth with your hand while speaking.

### **Things to Consider**

- Persons who may deal very well one-on-one in communication may have a hard time with two or more speakers, especially if there are many interruptions and interjections.
- Showing impatience to someone who is deaf or hearing impaired may cause the less assertive person to back off from telling you his or her needs.
- When someone asks, "What did you say?" the answers, "Never mind," "Nothing," or "It's not important," are very common replies. These are insulting and demeaning because they communicate that the person is not worth repeating yourself for.

## **PEOPLE WHO USE WHEELCHAIRS OR HAVE MOBILITY IMPAIRMENTS**

### **Things to Know**

- There are many reasons (not just being paralyzed) which might require someone to use a wheelchair. These might include loss of stamina or equilibrium, or a temporary condition like a fracture or recovery from surgery.
- There are a wide range of physical capabilities among people who use wheelchairs. This means that persons who use them may require different degrees of assistance, or no assistance at all.
- Some persons do not use wheelchairs exclusively, but may also use canes, leg braces and, in some cases, no assistive devices at all, or only for short periods.
- All wheelchairs are not the same. Different sizes and shapes meet different needs. Some wheelchairs move manually and others are motorized. Just because one person can access an area in his or her wheelchair does not mean that everyone with a wheelchair may be able to do so.
- If you offer a seat to a person who has limited mobility, keep in mind that chairs with arms and without wheels are easier for some people to use.
- People who do not have a visible disability may have needs related to their mobility. For example, a person with a respiratory or heart condition may have trouble walking long distances or walking quickly. Be sure that there are ample benches for people to sit and rest on.
- Some people have limited use of their hands, wrists or arms. Be prepared to offer assistance with reaching for, grasping or lifting objects, opening doors and display cases, and operating vending machines and other equipment.

## **Things to Do**

- If you are asked to fold, carry, or store a wheelchair, treat it with the same respect that you would if you were holding someone's eyeglasses. They are similar in many ways. Wheelchairs can break, they are difficult to have repaired on short notice and on weekends, and it is extremely disruptive to the user when they are out of commission.
- When you meet someone seated in a wheelchair, extend your hand to shake if that is what you normally do. A person who cannot shake hands will let you know. They will appreciate being treated in a normal way.
- Keep the ramps and wheelchair accessible doors to your building unlocked and unblocked.
- If the service counter present is too high for a wheelchair user to see over, step around to provide service. Have a clipboard ready for filling out forms.
- When speaking to someone who uses a wheelchair, remember to give the person a comfortable viewing angle of yourself. Having to look straight up is not a comfortable viewing angle.
- Falls are a big problem for people who have limited mobility. Be sure to set out adequate warning signs after washing floors. Also put out mats on rainy or snowy days to keep the floors as dry as possible.

## **Things to Avoid**

- Wheelchair users are people, not equipment. Don't lean over someone in a wheelchair to shake another person's hand or ask a wheelchair user to hold coats.
- Do not approach someone who is using a wheelchair and start pushing him or her without asking.
- When communicating, do not stand too close to the person in a wheelchair. Give him or her some space.

## **Things to Consider**

- It is a very common experience for persons who use wheelchairs to be told that some place is accessible when it is not. Listen carefully when anyone who uses a wheelchair tells you that some area which you thought was accessible is not.
- Do not assume that the person using a wheelchair needs assistance. Ask the person if there is anything special you can provide.

# CONDITIONS WHICH CAUSE DIFFICULTY WITH SPEECH

## Things to Know

- There are many reasons for having difficulty with speech. Deafness, Cerebral Palsy, stroke, head injury, physical malformation of speech mechanisms, and general speech impairment are just a few.
- It is not unusual in stressful situations for someone's speech to become harder to understand.

## Things to Do

- Give the person your full attention. If you have trouble understanding, don't nod. Just ask him to repeat. In most cases the person won't mind and will appreciate your effort to hear what he has to say.
- If you do not understand what a person is saying, bring it to his or her attention immediately and ask how the two of you may communicate more effectively. If it is a stressful situation, try to stay calm. If you are in a public area with many distractions, consider moving to a quiet or private location.
- Consider writing as an alternative means of communication.
- If there is no solution to the communication problem that can be worked out between you and the person, consider asking if there is a person who could translate or interpret what he or she is saying.

## Things to Avoid

- Do not pretend to understand when you really do not.
- Do not become exasperated or impatient with the communication process.
- Do not interrupt or finish sentences for the person with a disability.
- Don't tease or laugh at a person with a speech disability. The ability to communicate effectively and to be taken seriously is important to all of us.

## Things to Consider

- Many persons with difficulty speaking find themselves in situations where people treat them as if they are drunk, developmentally disabled, or mentally ill.
- Many persons with difficulty speaking are accustomed to being avoided, ignored, or even hung up on by phone.
- Accessibility for persons with difficulty in speech lies within your power. Your patience and communication skills are as important to someone with speech that is difficult to understand as a grab bar or a ramp is to someone who uses a wheelchair.

## **PERSONS OF SHORT STATURE**

### **Things to know**

- There are 200 diagnosed types of growth related disorders that result in a person being 4 ft 10 inches or less in height.
- For an adult, being treated as cute and childlike can be a tough obstacle.

### **Things to Do**

- Be aware of having necessary items within the person's reach to the maximum extent possible.
- Communication can be easier when people are at the same level. Persons of short stature have different preferences. You might kneel to be at the person's level; stand back so you can make eye contact without the person straining her neck (this can be hard to do in a crowded room); or sit in a chair. Act natural and follow the person's cues.

### **Things to Avoid**

- As with people who have other disabilities, never pet or kiss a person of short stature on the head.

## **DEVELOPMENTAL DISABILITY (DD)**

### **Things to Know**

- Developmental Disability, refers to conditions occurring before adulthood which sometimes result in below average intelligence, impaired motor functioning, or other disabling conditions.
- A low intelligence test score alone does not necessarily indicate that a person is developmentally disabled.
- What is seen by most people is behavior reflecting slow, arrested, or incomplete development before a person reaches the age of eighteen.
- Some people with developmental disabilities have a hard time using what they have learned and applying it from one setting or situation to another.
- It is important to remember that, even though someone is an adult, there are certain characteristics which are described as childish or childlike, leading to the erroneous conclusion that a person has a "mental age of 4 or 5." A person who is 30 years old with a mental age of five has had 25 more years of life experience upon which to base his or her behavior.

- Because each person with a developmental disability is an individual, there is no "overall" description one can give to alert that a person is developmentally disabled.
- Every person with a developmental disability will display characteristics differently, with varying levels of intensity.
- Not all people with developmental disabilities look disabled, nor will they act in the same way when making contact with people.
- People with developmental disabilities often rely on routine and on the familiar to manage work and daily living. Be aware that a change in the environment or in a routine may require some attention and a period of adjustment.

### **Things to Do**

- It can be difficult for people with developmental disabilities to make quick decisions. Be patient and allow the person to take their time.
- A calm, patient attitude on your part will prove to be your most effective tool.
- Speak to the person in clear sentences, using simple words and concrete—rather than abstract—concepts. Help her understand a complex idea by breaking it down into smaller parts.
- Clear signage with pictograms can help a person who has developmental disabilities to find her way around.
- Be aware that a "yes" response may be inappropriately given out of fear of disapproval or in an attempt to please.
- If a person with a developmental disability is lost, be aware that residents of Board and Care homes may have their names printed on their clothes, collar or similar location.

### **Things to Avoid**

- Don't use baby talk or talk down to people who have developmental disabilities. Gauge the pace, complexity, and vocabulary of your speech according to theirs.
- People with developmental disabilities may not have any speech, or may have very limited speech.
- Avoid frightening a person with developmental disabilities, as they may be unable to respond because of fear. They may, however, respond to questions, especially those requiring a "yes" or "no" answer.

### **Things to Consider**

- Remember that the person is an adult and, unless you are informed otherwise, can make her own decisions.
- Medication may slow their speech or reactions, or cause them to walk in a manner which arouses suspicion.

- People with developmental disabilities may be anxious to please. During an interview, the person may tell you what she thinks you want to hear. In certain situations, such as law enforcement or a doctor's examination, it can have grave consequences if your interview technique is not effective. Questions should be phrased in a neutral way to elicit accurate information. Verify responses by repeating each question in a different way.

## **CEREBRAL PALSY (CP)**

### **Things to Know:**

- Cerebral Palsy is a condition that results from damage to the central nervous system before birth, or early in life.
- "Cerebral" refers to the brain and "Palsy" to a disorder of movement or posture. It is neither progressive nor communicable, and has little or no relation to intelligence.
- Cerebral Palsy is characterized by an inability to fully control motor functions. A person with Cerebral Palsy may have spasms; involuntary movement; disturbance of gait or mobility; seizures; abnormal sensation and perception; impairment of sight, hearing, or speech; and mental retardation.

### **Things to Do**

- A person who may appear to be drunk, sick or have a medical emergency might in fact have CP or another disability. Get the facts before acting on your first impression, whether the situation is business, social or law enforcement.

### **Things to Avoid**

- Do not make assumptions about the intelligence of persons with Cerebral Palsy.
- Many people with CP have slurred speech and involuntary body movements. Your impulse may be to discount what they have to say, based on their appearance. Monitor your responses and interact with the person as you would with anyone else.

### **Things to Consider**

- Over a half million people in the United States have Cerebral Palsy. Many are wheelchair users and you may refer to the previous section concerning wheelchairs for additional information.

## **TOURETTE SYNDROME**

### **Things to Know**

- People with Tourette syndrome may make vocalizations or gestures such as tics that they cannot control.
- A small percentage of people with Tourette syndrome involuntarily say ethnic slurs or obscene words.
- A person with Tourette syndrome will benefit from the understanding and acceptance others.

### **Things to do**

- If a person with Tourette makes vocalizations during a conversation, simply wait for her to finish, then calmly continue.

### **Things to Consider**

- The more the person tries to contain these urges, the more the urges build up. It may be helpful for a person with Tourette to have the option to leave the meeting or conversation temporarily to release the build-up in a private place

## **EPILEPSY (SEIZURE DISORDER)**

### **Things to Know**

- Epilepsy is a symptom of a disorder of the central nervous system occurring either as a result of head trauma or as a condition present from birth, which may result in seizures.
- Epilepsy is not a disease, nor is it progressive, related to intelligence, or necessarily related to another disability.
- One person in a hundred has epilepsy; however, 80% of those diagnosed will have good control of seizures through medication.
- Be aware that beepers and strobe lights can trigger seizures in some people
- There are three seizure patterns: The Grand Mal convulsion consists of a loss of consciousness, stiffening, muscle rigidity and spasms. The Petit Mal seizure may not be readily recognized, as it usually consists of a lapse of from 5 - 25 seconds and gives the appearance of daydreaming or staring. The Psychomotor seizure may be seen only as staring or confusion, dizziness or fear, or other behavior such as lip smacking or erratic arm movements.

### **Things to Do**

- At the scene of a seizure, your best action would be to keep the person from getting injured by removing objects from the area which might cause injury (chairs, tables, etc.).
- If the person is still unconscious after a seizure, turn him or her on their side, with the face downward.
- When a seizure has ended, the person may feel disoriented and embarrassed. Try to ensure that he has privacy to collect himself.

### **Things to Avoid**

- Do not restrain the movements of a person having a seizure.
- Do not put anything between the teeth.
- Do not give the person anything to drink.

### **Things to Consider**

- Medical aid for epilepsy is usually not necessary unless a seizure lasts longer than 15 minutes.
- The person may not remember what has happened, and may require your assistance for a short period of time while getting reoriented.
- Seizures usually draw a crowd of onlookers. This is an excellent opportunity to set an example for others by your conduct, and educate the uninformed as to successful intervention techniques.

## **AUTISM**

### **Things to Know:**

- Autism is a severely incapacitating lifelong developmental disability that appears during the first three years of life.
- In its broad definition, autism or autistic-like symptoms occur in about five out of every thousand children.
- Autism is four times more common in males than in females, and is found throughout the world in families of all racial, ethnic and social backgrounds. Symptoms of autism include.
- Slow development or lack of physical, social, and learning skills.
- Immature rhythm of speech and limited understanding or use of words.

- Abnormal responses to sensations: sight, hearing, touch, pain, balance, smell, taste, etc. Abnormal ways of relating to people, objects and event

### **Things to Do**

- Quite often, when you come into contact with people with autism, they will be in their neighborhood or where family or friends are near.
- There are no hard and fast rules for dealing with people who have autism. Be aware of the symptoms of autism.
- A calm, persistent approach should work best.

### **Things to Avoid**

- Resist the natural tendency to counter aggression or non-compliance with physical control, since merely touching someone with autism might cause them to flee.
- Attempting to confine a person who is autistic might cause great fear and resistance.

### **Things to Consider**

- At first glance, the actions of persons with autism may seem to be hostile, antagonistic, bizarre or drug-induced.
- People with autism sometimes feel pain when others would not, and at other times feel no pain.
- Your attention may be drawn to people who are autistic by their "odd" behavior. People with autism may show a fascination with something inanimate (especially wheels or circular objects), walk into traffic without looking, or be engaged in other aggressive or self-injurious behavior.

## **PSYCHIATRIC DISABILITIES (MENTAL ILLNESS)**

### **Things to Know**

- People with psychiatric disabilities may at times have difficulty coping with the tasks and interactions of daily life.
- The disorder may interfere with their ability to feel, think and relate to others.
- Most people with psychiatric disabilities are not violent
- The biggest obstacle is societal attitudes about mental illness

- Mental Illness covers a broad range of psychiatric disabilities such as schizophrenia, manic depression, severe depression, and most anxiety disorders.
- Some of these mental illnesses can be treated with medicine but, because they do not recognize that they are ill, people who have mental illness frequently stop taking their medication.

### **Things to Do**

- Stress can affect the person's ability to function. Try to keep the pressure of the situation to a minimum.
- In a crisis, stay calm and be supportive as you would with anyone. Ask how you can help, and find out if there is a support person who can be sent for. If appropriate, you might ask if the person has medication that he needs to take.
- Call for professional assistance if necessary.

### **Things to Avoid**

- Resist the natural tendency to counter aggression or non-compliance with physical control, since merely touching someone with a mental disability might cause them to flee or react violently.
- Tones of voice, actions, or appearance which are threatening to a person with a mental disability could trigger an unexpected or unwanted reaction.

### **Things to Consider**

- Neurological disorders and the broad range of mental illnesses present challenges for medical professionals, family members, friends, and the people affected by the disabilities.
- Your interactions and conversations with people who have such disabilities may be frustrating or unnerving at times.
- By remaining calm, friendly, and helpful you should be able to attain your objective despite the complications which are involved.
- People who have psychiatric disabilities have varying personalities and different ways of coping with their disability. Some may have trouble picking up on social cues; others may be supersensitive. One person may be very high energy, while someone else may appear sluggish. Treat each person as an individual. Ask what will make him most comfortable and respect his needs to the maximum extent possible

## **ALZHEIMER'S DISEASE**

Disabilities which do not manifest themselves with physical symptoms can present unexpected complications when interacting with anyone you do not know. What might be considered a "normal" conversation could change without warning or apparent cause.

### **Things to Know**

- Alzheimer's disease normally affects people who are older.
- Childlike characteristics or symptoms may suddenly appear, and memory loss is the most common sign that Alzheimer's disease is present.
- People who have Alzheimer's disease often wander away from their residences, and may have very plausible explanations of where they think they are going.

## **Traumatic Brain Injury (TBI) Acquired Brain Injury (ABI)**

Head injuries, can occur in accidents which sometimes appear minor. A person with a TBI may not recognize that their characteristics or actions change when the injury's symptoms are manifested. Even if there are normally no signs of a TBI present, a sudden change in speech pattern or volume, a burst of anger, or an indecipherable sentence could be an indication that a head injury has occurred.

### **Things to Know**

- People with brain injury may have a loss of muscle control or mobility that is not obvious. For example, a person may not be able to sign her name, even though she can move her hand.
- A person with a brain injury may have poor impulse control. The person may make inappropriate comments and may not understand social cues or "get" indications that she has offended someone. In her frustration to understand, or to get her own ideas across, she may seem pushy. All of these behaviors arise as a result of the injury.
- A person with a brain injury may be unable to follow directions due to poor short-term memory or poor directional orientation. She may ask to be accompanied, or she may use a guide dog for orientation, although she does not appear to be mobility impaired.
- The person may have trouble concentrating or organizing her thoughts, especially in an over stimulating environment, like a crowded movie theater or

transportation terminal. Be patient. You might suggest going somewhere with fewer distractions

### **Things to Do**

- Head injuries can be so varied that there are no easy rules for dealing with the symptoms they cause.
- Be alert for unusual characteristics, actions or phrases; if they present, assume that there may be some type of disability present.
- If you are not sure that the person understands you, ask if she would like you to write down what you were saying.
- A calm, friendly approach works best while interacting with anyone.

### **Things to Avoid**

- Resist the natural tendency to counter aggression or non-compliance with physical control, since merely touching someone with a head injury might cause them to flee or react violently.
- Tones of voice, actions, or appearance which are threatening to a person with a mental disability could trigger an unexpected or unwanted reaction.

### **Things to Consider**

- Neurological disorders and the broad range of mental illnesses, head injuries present challenges for medical professionals, family members, friends, and the people affected by the disabilities.
- Your interactions and conversations with people who have such disabilities may be frustrating or unnerving at times.
- By remaining calm, friendly, and helpful you should be able to attain your objective despite the complications which are involved.

## **HIDDEN DISABILITIES**

Not all disabilities are apparent. A person may have trouble following a conversation, may not respond when you call or wave to them, may make a request that seems strange to you, or may say or do something that seems inappropriate. The person may have a hidden disability, such as low vision, a hearing impairment, a learning disability, traumatic brain injury, mental retardation, or mental illness. Don't make assumptions about the person or their disability. Be open-minded.

## **A WORD ABOUT CONFIDENTIALITY**

You may really care or you may just be curious about a person with a disability who is in crisis, suddenly ill, or does not “show” for unexplained reasons. In spite of your concern, please respect the privacy of a person with a disability. Allow him to discuss his situation if and when he feels comfortable doing so.

## **LEARNING MORE**

Lack of knowledge or misinformation may lead you to shy away from interacting with persons with certain disabilities. Preconceptions about mental illness, AIDS, Cerebral Palsy, Tourette Syndrome, Alzheimer's Disease and other disabilities often lead to a lack of acceptance by those around the person. Remember that we are all complex human beings; a disability is just one aspect of a person. Learning more about the disability may alleviate your fears, and can pave the way for you to see the person for who they really are. Keep practicing, and enjoy the experience.

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